

PLEASE READ THIS ENTIRE INFORMATION SHEET BEFORE COMPLETING THE APPLICATION.

■ **WHAT IS THE EDUCATIONAL OPPORTUNITY GRANT?**

The Educational Opportunity Grant (EOG) program provides \$2,500 grants to financially needy, placebound Washington residents as an incentive to complete their four-year degree at eligible public and private colleges. The EOG's purpose is to encourage students who have already earned junior standing, or an Associate of Arts or Associate of Science degree, to complete a four-year degree.

■ **WHO QUALIFIES FOR THE GRANT?**

To apply for this grant, you must be "placebound" and meet other eligibility requirements.

- The term **placebound** describes students who have certain personal barriers that make it difficult for them to transfer and continue their education at a four-year college. In general, eligible students are either those who can, with the financial help of the grant, relocate to attend college or those who are unable to relocate to attend college because of specific personal barriers.
- You must be a Washington resident.
- Before your first term of enrollment at the four-year school, you must **have achieved junior standing** as recognized by the school you plan to attend, either by completing an Associate of Arts or Associate of Science transfer degree program, or through earned credits.
- You must demonstrate financial need as determined by the financial aid administrator at the college you plan to attend. **You must have completed all college financial aid applications, including the *Free Application for Federal Student Aid* (FAFSA).** (If you have Internet access, you may complete a FAFSA online at: <http://www.fafsa.ed.gov>).
- You must be planning to attend an **eligible** four-year college in Washington state (see list below).
- You must be a junior or senior transfer student in 2005-2006, and must not have been enrolled during the prior academic year at the four-year school you plan to attend with this grant.

■ **WHICH SCHOOLS CAN I ATTEND WITH THE GRANT?**

Four-year schools currently meeting the program's requirements are: Antioch University, Bastyr University, Central Washington University, Cornish College of the Arts, Eastern Washington University, The Evergreen State College, Gonzaga University, Henry Cogswell College, Heritage University, Northwest College, Pacific Lutheran University, Saint Martin's College, Seattle Pacific University, Seattle University, University of Puget Sound, University of Washington, Walla Walla College, Washington State University, Western Washington University, Whitman College, and Whitworth College.

The college you attend must not require you to be involved in any educational program that includes any religious worship, exercise or instruction.

■ **HOW MUCH WILL I RECEIVE IF I AM ELIGIBLE FOR A GRANT?**

The grant will be \$2,500 for the academic year. *If you attend less than the full academic year, or if your financial need is less than \$2,500*, your grant amount will be adjusted downward. For students attending a quarter school, the maximum grant is for six quarters. For students attending a semester school, the maximum grant is for four semesters. Once awarded, you will receive the grant for either six quarters or four semesters and will not need to complete a renewal application. If you are awarded, your EOG money will be sent directly to the college. If you have not completed your Bachelor's degree at the end of your six quarters or four semesters, you may petition for an additional two terms of EOG funding. Petitions are awarded to students with extenuating circumstances and are on a first come, first served basis.

▪ **WILL I RECEIVE THE GRANT IN ADDITION TO OTHER FINANCIAL AID?**

If your financial need (based on FAFSA documentation) is not met by other financial aid, the Educational Opportunity Grant will be added to your financial aid package. If your financial need is fully met by other financial aid, then the Educational Opportunity Grant will replace *loans*, not grants or scholarships.

▪ **HOW DO I SUBMIT MY APPLICATION FOR THE GRANT?**

The application form has three parts. You must complete parts A & B; the financial aid administrator at the college you plan to attend must complete Part C. Submit Part C to your financial aid administrators immediately so they have sufficient time to complete it. If you apply to more than one school, please submit one complete application for each school that you are considering.

▪ **HOW WILL RECIPIENTS BE SELECTED?**

Complete applications will be reviewed continuously, beginning April 1, 2005 until May 30, 2006, as long as funds remain available. Priority will go to the earliest complete applications. Applications are scored based on each student's placebound status and financial need.

▪ **WHEN SHOULD I SUBMIT MY APPLICATION?**

*You must apply **before** your first term of enrollment at the four-year college you plan on attending.*

☐ I plan to begin attendance **fall term 2005**. Apply between April 1, 2005 and September 1, 2005.

☐ I plan to begin attendance **winter term 2006**. Apply between April 1, 2005 and February 1, 2006.

☐ I plan to begin attendance **spring or summer quarter 2006**. Apply between April 1, 2005 and May 1, 2006 (no later than June 1, 2006 for summer quarter enrollment only).

▪ **HOW WILL I BE NOTIFIED IF I RECEIVE AN AWARD?**

We will mail you either an award or non-award letter after your application has been reviewed. If you are awarded, we will also mail a copy of your award letter to the financial aid office at the college(s) you applied to.

▪ **HOW DO I REMAIN ELIGIBLE?**

You will remain eligible within the six-quarter or four-semester award period as long as the college you attend can certify that you continue to be in good standing (which includes making satisfactory academic progress).

▪ **PLEASE NOTE THE FOLLOWING:**

- ♦ Awards are **provisional** until schools can confirm student eligibility just prior to disbursement of funds.
- ♦ Program funding and program eligibility criteria depend upon legislative provisions and appropriation.

▪ **AGENCY CONTACTS**

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Higher Education Coordinating Board

Educational Opportunity Grant

917 Lakeridge Way

PO Box 43430

Olympia, WA 98504-3430

<http://www.hecb.wa.gov/paying/waaidprgm/eog.asp>

**WASHINGTON STATE
EDUCATIONAL OPPORTUNITY GRANT
2005–2006 APPLICATION**

HECB USE ONLY

Fall 05 _____
Winter 06 _____
Spring 06 _____
Summer 06 _____

INSTRUCTIONS

This application consists of three parts: **You must complete Parts A and B**, typed or legibly written in ink, and return them to the Higher Education Coordinating Board. Send Part C to the four-year college you plan to attend. Your college will complete Part C and will forward it to the Higher Education Coordinating Board for processing. **(NOTE: You must have completed the admissions process and the FAFSA before your financial aid administrator can complete Part C. See page one of the information sheet.)** If you are considering more than one college at this time, please complete a separate application for each school.

DEADLINE: While funds remain available, applications will be reviewed on a first-come, first-served basis beginning April 1, 2005, and ending June 1, 2006 (Please refer to the Application Information Sheet for specific deadlines related to the term you intend to enroll at a four-year school.)

PART A – TO BE COMPLETED BY STUDENT

1. Name: _____ / _____ / _____ 2. SSN: _____ - _____ - _____
Last First Middle
3. Birthdate: ____ / ____ / ____ Male ☐ Female ☐ 4. Phone: (____) _____
5. E-Mail address: _____
6. 2005-06 Terms of enrollment (Mark ALL that apply): Fall 05 ☐ Winter 06 ☐ Spring 06 ☐ Summer 06 ☐
7. Permanent residence: _____
Street City State Zip
8. Mailing address: _____
(if different) Street City State Zip
9. Date you became a legal resident of Washington: _____ / _____
(If you have always lived in this state, use your date of birth.) Month Year
10. Indicate the schools you are considering attending, in order of preference, during the 2005-06 school year.

College	Main Campus	Branch Campus / Extended Learning Center (Please list site)
1) _____	<input type="checkbox"/> OR <input type="checkbox"/>	_____
2) _____	<input type="checkbox"/> OR <input type="checkbox"/>	_____
3) _____	<input type="checkbox"/> OR <input type="checkbox"/>	_____

NOTE: YOU MAY NOT USE THIS GRANT TO CONTINUE AT YOUR CURRENT INSTITUTION.

11. List **all** colleges or universities you have previously attended in the space below.

<u>College</u>	<u>Location</u>	<u>Dates Attended</u>	<u>Degree</u>	<u>Degree Date</u>

(Attach a list of any additional colleges if necessary.)

12. Academic major: _____

13. Estimated baccalaureate graduation date: _____

14. Planned enrollment status for 2005-2006: Full-Time ☐ Other ☐ _____
(Explain)

15. Amount of educational loans to date (student loans only, for example, Stafford or Perkins Loans):

Amount borrowed: \$ _____ Current unpaid balance: \$ _____

16. You **must have** completed the **Free Application for Federal Student Aid (FAFSA)** form and applied for admission in order for your financial aid administrator to complete Part C of this application. Check with the college you plan to attend for further instructions about completing the financial aid process. **If you have Internet access, you may apply on-line at: <http://www.fafsa.ed.gov>.**

☐ I **have** applied for admission.

☐ I **have** applied for financial aid.

☐ I **have not** applied for financial aid, but will contact my financial aid office.

RELEASE OF INFORMATION: The HECB may release your name, the college you previously attended, and the names of the college(s) you entered on question #10 to interested parties such as the college you previously attended for the purpose of recognizing the accomplishments of grant recipients. Please check here **ONLY** if you do not wish this information to be released. NO ☐ I do not authorize the HECB to release my information for the purpose of recognition.

STUDENT AGREEMENT: By my signature, I certify that the information contained in Parts A and B of this application is true and correct to the best of my knowledge. Further, I give my consent to the financial aid administrator at the college I plan to attend to release necessary demographic and financial information to assist in the Higher Education Coordinating Board's administration of the program. I certify that, according to the definition provided and to my answers on Part B, I am a placebound citizen. During the entire period I receive the Educational Opportunity Grant, I understand that I cannot pursue a degree in theology or be required by my college or university to be involved in any program or class that includes any religious worship, exercise or instruction.

Signature

Date

Please Print Name

Send completed application to:

**Educational Opportunity Grant Program
Higher Education Coordinating Board
917 Lakeridge Way / PO Box 43430
Olympia, WA 98504-3430**

**EDUCATIONAL OPPORTUNITY GRANT
2005–2006 APPLICATION
PART B – “PLACEBOUND DESCRIPTION”**

For this grant program, a “**placebound person**” is defined as one who:

- Has junior standing through the completion of an Associate of Arts or Sciences degree; **or** has transferable credits equal to junior standing at the four-year school they plan on attending with this grant.
- Has been unable to complete a college program because of family or employment commitments, health concerns, monetary inability, or other similar factors.
- Would be able to complete their bachelor’s degree with the help of this grant.

Please mark the “Yes” or “No” box by each statement as it applies to your plans to attend a four-year school. Explain special circumstances on the reverse side.

Y N

- ☐ ☐ I am the caregiver for an elderly or disabled family member. (Explain in detail)
- ☐ ☐ I will continue to work at my current job.
- ☐ ☐ I am a homeowner.
- ☐ ☐ I will be moving out of the area, approximately _____ miles, to attend school.
- ☐ ☐ I am returning to school this term after an absence of one or more years.
- ☐ ☐ I have a documented medical condition that requires continued care by my local doctor.
- ☐ ☐ Family or friends will assist me with childcare while I am in school.
- ☐ ☐ My spouse will be continuing in a permanent job.
- ☐ ☐ There are no public or private four-year colleges within reasonable commuting distance of my current residence (approximately 1 hour or 50 miles).
- ☐ ☐ My dependent(s) has a documented medical condition that requires continued care by a local doctor.
- ☐ ☐ I will continue to live in my current government-subsidized, low-income housing. (Does not include dormitories.)
- ☐ ☐ The four-year school I am applying to offers an academic/degree program not available within commuting distance of my current residence (approximately 1 hour or 50 miles). The degree program is _____.
- ☐ ☐ My children will be enrolled in the same daycare or school as at present.
- ☐ ☐ The cost of moving has prevented me from going to a four-year college out of the area.

Name: _____ Social Security Number: _____ - _____ - _____
(Please Print)

[illegible][illegible]

STUDENT ID #

Name: _____ / _____ / _____ SSN: _____ - _____ - _____
 (Last) (First) (MI)

***** FOR SCHOOL USE ONLY *****

- A. Type: _____ Dependent, lives with parents
 _____ Dependent, lives away from parents
 _____ Independent, unmarried, no dependents
 _____ Independent, unmarried, with dependents
 _____ Independent, married, no other dependents
 _____ Independent, married with dependents

- C. Budget amount: \$

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- A. Parent income (if dependent student): \$

- B. Student income (if dependent or independent): \$,

- C. Spouse's income from work (if married): \$

3. Total expected family contribution: \$

4. Financial need based on budget in Item #1: \$.

5. Family size: _____ Number in college: _____

6. Washington resident: Yes: _____ No: _____ If applicant is not a Washington resident, but anticipates residency during the academic year, which term?

7. Class standing: Applicant must have received an Associate of Arts or Sciences degree or achieved junior status in order to receive an Educational Opportunity Grant.

- A. Associate of Arts or Sciences Degree: Yes: _____ No: _____ Unknown at this time: _____

- B. Class standing at beginning of the student's initial term of enrollment during the 2005-2006 academic year:
Junior: _____ Senior: _____

- C. If neither, when do you anticipate the student will advance to junior standing or obtain an Associate of Arts or Sciences degree? By the beginning of _____ quarter/semester, 2005-2006.
(term)

8. Ethnicity: ___ White/Caucasian ___ Asian/Pacific Islander ___ Black/African American
 ___ American Indian ___ Eskimo ___ Hispanic/Spanish
 ___ Other ___ Aleut ___ Unknown/Unavailable

9. Comments: (Please add anything that would help clarify the student's status; for example lack of sufficient transfer credits, lack of admission status, re-determination of need, selected for verification, or current student.)

10. By my signature, I certify that the information contained and requested in **Part C** of this application is true and complete to the best of my knowledge.

Signature of financial aid administrator

Date

Print name

Institution